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144002-2001AMENDMENT

Kindly amend the application, without prejudice, without admission, without surrender of subject matter and without any intention to create any estoppel as to equivalents as follows:

IN THE CLAIMS

1. (Currently amended) A method for treating hepatitis C in an HIV-negative patient in need thereof comprising administering ribavirin (RBV) or RBV and interferon-alpha (IFN), wherein the improvement comprises administering Erythropoietin (EPO) concomitantly or sequentially or via co-administration with the RBV or with the RBV and IFN and the RBV is administered at a maximum effective dosage necessary to eradicate hepatitis C.

2. (Currently amended) A method for treating ribavirin or ribavirin and interferon-alpha induced anemia in hepatitis C patients comprising administering erythropoietin to a patient in need thereof as a liquid preparation subcutaneously, parenterally, intradermally, intramuscularly or intravenously wherein the ribavirin or ribavirin and interferon-alpha induced anemia is a result of treating said hepatitis C patients with a maximum ribavirin effective dosage necessary to eradicate hepatitis C.

3. (Currently amended) A method for treating ribavirin or ribavirin and interferon-alpha induced anemia comprising administering Erythropoietin to a patient in need thereof as a suspension, emulsion, syrup or elixir wherein the ribavirin or ribavirin and interferon-alpha induced anemia is a result of treating said patient in need thereof with a maximum effective ribavirin dosage necessary to eradicate hepatitis C.

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4. (Currently amended) A method for treating hepatitis C (HCV) and for treating ribavirin or ribavirin and interferon-alpha induced anemia employed in treating said HCV in a patient in need thereof by administering erythropoietin to the patient subcutaneously for at least about six months wherein the ribavirin or ribavirin and interferon-alpha induced anemia is a result of treating said HCV in a patient in need thereof with a maximum effective ribavirin dosage necessary to eradicate said HCV.

5. (Currently amended) A method for treating hepatitis C (HCV) and for treating ribavirin or ribavirin and interferon-alpha induced anemia employed in treating said HCV in a patient in need thereof by administering erythropoietin to the patient subcutaneously for at least about 12 months wherein the ribavirin or ribavirin and interferon-alpha induced anemia is a result of treating said HCV in a patient in need thereof with a maximum effective ribavirin dosage necessary to eradicate said HCV.

6. (Original) The method of claim 4 wherein the hepatitis C is genotype 2 and/or 3.

7. (Previously presented) The method of claim 5 wherein the hepatitis C is genotype 1 and/or 4.

8. (Currently amended) In a method for treating hepatitis C in a patient in need thereof, comprising administering ribavirin and interferon-alpha wherein the improvement

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comprises co-administering to the patient subcutaneously, at a pre-determined effective amount, an Erythropoietin liquid preparation wherein the ribavirin is administered in a maximum effective dosage necessary to eradicate hepatitis C.

9. (Original) The method for treating hepatitis C comprising administering ribavirin and interferon-alpha wherein the improvement as claimed in claim 8 comprises administering to patients subcutaneously at a weekly dose of about 10,000 to 70,000 units of erythropoietin.

10. (Original) The method for treating hepatitis C comprising administering ribavirin and interferon-alpha wherein the improvement as claimed in claim 8 comprises administering to patients subcutaneously at a weekly dose of about 20,000 to 60,000 units of erythropoietin.

11. (Original) The method of claim 8 wherein the patient is HIV negative.

12. (Canceled)

13. (New) A method for treating hepatitis C in an HIV-negative patient who does not have chronic renal disease comprising administering ribavirin (RBV) or RBV and interferon-alpha (IFN), wherein the improvement comprises administering Erythropoietin (EPO) concomitantly or sequentially or via co-administration with the RBV or with the RBV and IFN.

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14. (New) A method for treating ribavirin or ribavirin and interferon-alpha induced anemia in a hepatitis C patient who does not have chronic renal disease comprising administering erythropoietin to a patient in need thereof as a liquid preparation subcutaneously, parenterally, intradermally, intramuscularly or intravenously.

15. (New) A method for treating a patient with ribavirin or ribavirin and interferon-alpha induced anemia who does not have chronic renal disease comprising administering Erythropoietin (EPO) to the patient.

16. (New) The method of claim 15 wherein the EPO is in the form of a suspension, emulsion, syrup or elixir.

17. (New) A method for treating hepatitis C (HCV) and for treating ribavirin or ribavirin and interferon-alpha induced anemia in a HCV patient who does not have chronic renal disease, comprising administering erythropoietin to the patient subcutaneously for at least about six months.

18. (New) A method for treating hepatitis C (HCV) and for treating ribavirin or ribavirin and interferon-alpha induced anemia in a HCV patient who does not have chronic renal disease, comprising administering erythropoietin to the patient subcutaneously for at least about 12 months.

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19. (New) The method of claim 16 wherein the hepatitis C is genotype 2 and/or 3.

20. (New) The method of claim 17 wherein the hepatitis C is genotype 1 and/or 4.

21. (New) A method for treating hepatitis C in a patient who does not have chronic renal disease comprising administering ribavirin and interferon-alpha wherein the improvement comprises co-administering to the patient subcutaneously, at a pre-determined effective amount, an Erythropoietin (EPO) liquid preparation.

22. (New) The method as claimed in claim 20 wherein the EPO is administered at a weekly dose of about 10,000 to 70,000 units of erythropoietin.

23. (New) The method as claimed in claim 20 wherein the EPO is administered subcutaneously at a weekly dose of about 20,000 to 60,000 units of erythropoietin.

24. (New) The method as claimed in claim 20 wherein the patient is HIV negative.

25. (New) The method as claimed in claims 1-5 and 8, wherein the dosage is between about 800 mg/daily to 1200 mg/daily of ribavirin.

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26. (New) The method as claimed in claims 1-5 and 8, wherein the dosage is
between about 1000-1200 mg/daily of ribavirin.